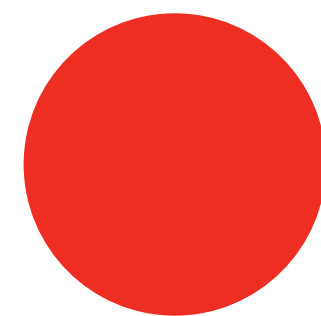
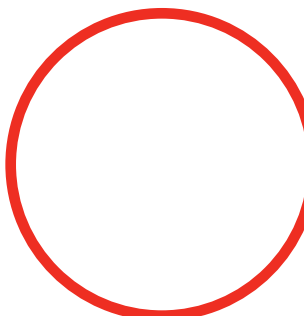
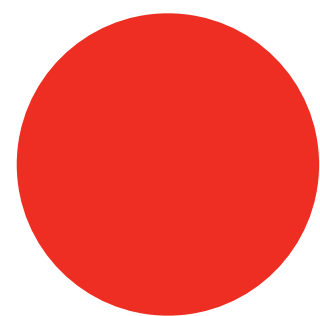
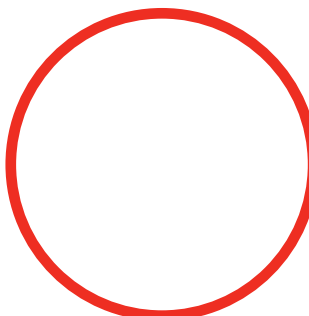
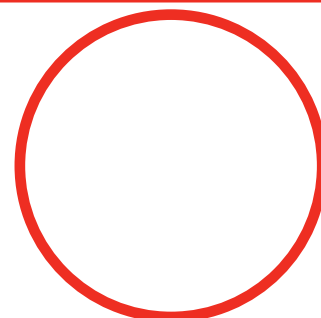
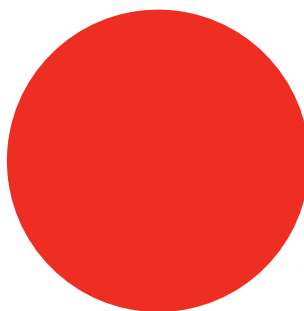
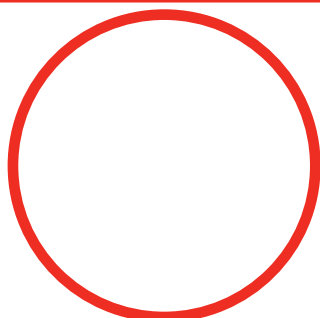
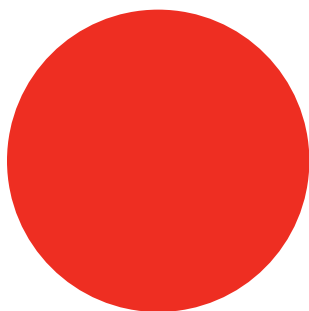


CANADIAN
AIDS
SOCIETY



SOCIÉTÉ
CANADIENNE
DU SIDA

2005 - 2006 Annual Report



Board of Directors

Chair: Gail Flintoft, Ontario Regional Director

Vice Chair: Gerry McConnery, Prairie PLWHIV/AIDS Director

Treasurer: René Legaré, Québec Regional Director

Secretary: Raymond Berger, Québec PLWHIV/AIDS Director

Albert McNutt, Atlantic PLWHIV/AIDS Director

Alex McClelland, Director at Large

Debra Jakubec, Prairie Regional Director

Irene Masinde, Director at Large

Laura Delany, Québec Regional Director

Malsah, Pacific Regional Director

Matt Lovick, PLWHIV/AIDS Youth Director

Michael Yodder, Pacific PLWHIV/AIDS Director

Patrick Kearns, Ontario PLWHIV/AIDS Director

Troy Perrot, Atlantic Regional Director

Laura Delany, Québec Regional Director

Staff

Paul Lapierre, Executive Director

Kim Thomas, Director of Programs / Acting Executive Director

Ainsley Chapman, Project Consultant

Benjamin Dixon, Finance and Administration Assistant

Claire Checkland, Program Consultant

Darren Fisher, Events and Walk for Life Coordinator

Jes Smith, Project/Programs Assistant

Josée Damboise, Executive Assistant

Holly Wagg, Skills Team Leader/Director of Marketing and Communications

Linda Truglia, Skills Building Coordinator

Linh Nguyen, Manager of Finance and Administration

Lynne Belle-Isle, Project Consultant

Marc-André LeBlanc, Program Consultant

Mark Creighan, Media Relations Officer

Martin de Vries, Development Officer

Maxxine Rattner, Program Consultant

Nichole Downer, Program Consultant

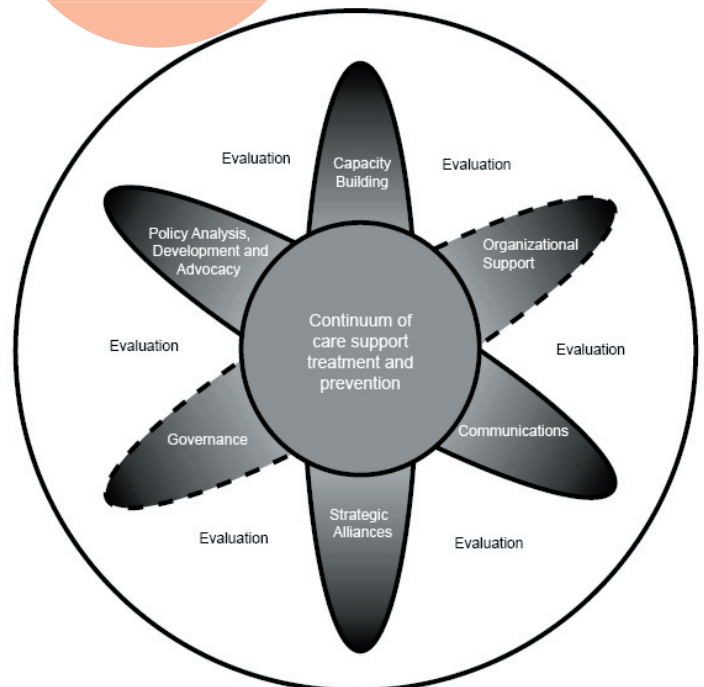
Shaleena Theophilus, Program Consultant

Stephen Alexander, Program Consultant

CAS' Integrated Model

In 2001 the membership, board and staff of the Canadian AIDS Society (CAS) recognized that the challenges facing the AIDS movement in Canada required a new approach to policy, communications and skills building. The work required to address HIV/AIDS in Canada was becoming increasingly complex and interconnected and an operational model that addressed these complexities and the connections between populations (e.g. gay men, Aboriginal communities, prisoners, sex workers, ethnocultural communities, people who use drugs, women, youth) and broader policies and issues (e.g. Harm Reduction, greater involvement of people living with HIV/AIDS (GIPA), rights around testing and disclosure) was needed.

This model had to integrate the roles of community in CAS' governance, including the role of the people living with HIV/AIDS, the need for population-specific responses, the role of the Society as a national voice for the community-based AIDS movement and the creation of mechanisms that would identify priorities, partners and responses that met the needs of the community while respecting the resource constraints of the organization. The CAS Integrated Model was the result. The model has provided CAS with the means to be flexible, inclusive and responsive, while carrying out ongoing work on priority issues identified by the community-based AIDS movement.



Governance

As required by its constitution, CAS is directed by an elected Board of Directors. The Board is made up of thirteen directors, two from each of CAS' five regions, two directors at large and a youth director at large. At least one of the directors from each region is a person living with HIV/AIDS (PLWHIV/AIDS).

The PLWHIV/AIDS Forum (Forum) was held June 15 to 17, 2005 in Ottawa, Ontario. Over one hundred people participated in this meeting where a number of resolutions were put forward to help guide the Board of Directors in identifying priorities and activities for the next year's work plan.

In order to develop long-term strategic action, CAS carried out an extensive consultation with its member and partner groups during the spring and summer of 2005. This consultation resulted in the development of a five-year strategic plan.

Policy Analysis, Development and Advocacy

CAS monitors and analyses federal programs, policies, regulations, legislation and processes that are relevant to HIV/AIDS through the lens of the experience of the HIV/AIDS community and of people living with HIV/AIDS. CAS uses this analysis, and the shared experiences of our membership, as a basis for advocating on behalf of communities affected by and living with HIV/AIDS. Examples included:

- At the end of the 2005-06 fiscal year, CAS completed a 27-month project examining inconsistencies between provincial income programs.
- CAS and the Canadian HIV/AIDS Legal Network developed a response to the media regarding the distribution of crack kits.
- After organizing the 2nd Canadian Microbicides Symposium, CAS continued its involvement in the development of the Canadian Microbicides Action Plan.
- CAS' response to Health Canada's consultation on the Medical Marijuana Access Regulations represents a strong stance in support of the need to make medical marijuana accessible as a treatment.
- CAS continues to play an active role in the development of the Canadian Vaccines Action Plan.

- CAS received support to act as an intervener in the Little Sister's Supreme Court cases seeking a decision in the matter of books and media being stopped from entering Canada for sale at the bookstore in Vancouver.
- CAS began meeting with all of the government departments represented on the Assistant Deputy Minister's Roundtable on HIV/AIDS.

Capacity Building

CAS supports member groups in the development of structures, policies, procedures, resources and direct skills that enhance their capacity to work in their communities. CAS works directly with member organizations to conduct needs assessments, supply information and policy analysis, deliver skills building sessions and works with member groups to develop and implement strategies to address their own needs.

The 5th Canadian HIV/AIDS Skills Building Symposium (Skills 2005) was held in Montreal, Quebec in October with over 700 participants. This national conference featured over 65 workshops, 20 posters and included for the first time a series of 6 panel presentations where panelists addressed policy-based and community-based issues.

Other activities included:

- A satellite on Gay Men's Sexual Health which resulted in a national gay men's health networking group.
- Workshops and information on crystal meth use as its popularity spread across Canada.
- The release of the 5th edition of HIV Transmission: Guidelines for Assessing Risk and presentations on this resource at several meetings.
- A traveling exhibit Giving Women Power Over AIDS is touring Canada with stops planned in five cities.
- CAS held a number of consultations across Canada on the needs and experiences of PLWHIV/AIDS when it comes to medical marijuana.
- Continued partnership with the International AIDS Vaccine Initiative (IAVI) results in regular updates to community-based organizations on the development of vaccines and vaccines trials.

Organizational Supports

Organizational supports include administration, management of human, material and financial resources and fund development. All of these elements are critical components of an effectively and efficiently run organization.

The Canadian AIDS Society relocated its national offices in January 2006. This activity required over six months of planning.

Supports for staff members included:

- Support for dealing with multiple losses with the AIDS Bereavement Project of Ontario.
- A new benefits package providing additional incentive for staff retention and recruitment.

Strategic Alliance

CAS continues to develop deliberate and effective strategies to identify, form and nurture alliances with a diverse array of organizations. This allows CAS to better understand relevant stakeholders, as well as sensitize them to the mission, values and strategic plan of the Society.

The myriad of issues that are influencing the HIV/AIDS epidemic in Canada, underpins the need for partnerships where CAS can render the voice that it is mandated to represent while continuing to integrate the results of these networks into its regular activities. Partnerships developed and enhanced this year include:

- Episodic Disability Network
- The National Anti-Poverty Organization (NAPO)
- Gay Men's Sexual Health Awareness Campaign hosted by AIDS Vancouver.
- International AIDS Conference (AIDS 2006)
- Blueprint for Action on Women & Girls and HIV/AIDS
- Canadian Harm Reduction Network
- North American Treatment Action Forum (NATAF)

Communications

CAS disseminates information to member groups, key partners, federal parliamentarians, government departments and the general public, which allows CAS to develop communications strategies with members, partners and government, and to raise the public profile of the organization. It also permits CAS to gain information from a variety of sources, which can then inform the work of the organization in a variety of ways. Ultimately, CAS' objective is to keep the HIV/AIDS epidemic in Canada in the public eye and work with our members in developing a national voice on community HIV/AIDS issues.

- A new logo was approved by the Board in March 2006. CAS is taking the opportunity of a new brand to build greater public awareness of AIDS and CAS in Canada.
- Media topics of interest included Crystal Meth and Harm Reduction, Walk for Life, reported HIV Superinfections, microbicides, Canada Blood Services donor questionnaire.
- The media department helped develop resources for the Walk for Life launch, including the national launch that featured Rick Mercer as a spokesperson.
- CAS set up an elections web site and issued questions to all parties regarding their support for people living with HIV/AIDS in Canada
- For World AIDS DAY we were able to secure full-page print advertisements in four major media outlets: Globe and Mail, La Presse, Maclean's, and L'Actualite.

Walk for Life

The Walk for Life was held in over 100 communities this year with a total number of 32,500 walkers and \$1,725,064 million raised to support community-based AIDS organizations across Canada. The challenge of recruiting a national sponsor for the Walk for Life remains a central concern for the National Advisory Committee and the Walk for Life Sponsorship Committee. CAS has been working with member groups to begin addressing the resolutions brought forward at the 2005 Annual General Meeting and has established a plan of action for the upcoming year.

Supporters

The Canadian AIDS Society would like to thank its supporters and volunteers, whose generosity ensures the success of our programs and projects. We gratefully acknowledge all contributions received during the past fiscal year and thank those who made our work possible.

The following is a list of major supporters from the government, corporations, foundations and individuals who donated directly or in-kind between April 1, 2005 and March 31, 2006.

Government

Public Health Agency of Canada
Social Development Canada – Social Development Partnerships Program
Health Canada – International Affairs Directorate
Canadian Heritage
AIDS Bureau, Ontario Ministry of Health and Long Term Care
Alberta Health & Wellness
Human Resources and Skills Development Canada

International

International AIDS Vaccine Initiative (IAVI)
Global Campaign for Microbicides at the Program for Appropriate Technology in Health (PATH)

Corporations and Foundations

Donations over \$50,000



Donations \$25,000 to \$49,999

Boehringer Ingelheim
Bristol Myers-Squibb Inc.
Gilead Sciences Inc.
Levi Strauss Foundation
Pfizer Canada Inc.

Donations \$10,000 to \$24,999

Abbott Laboratories, Ltd.
Hoffman-LaRoche Ltd.
M.A.C. AIDS Fund

Donations \$1,000 to \$9,999

Solvay Pharma
Anemia Institute For Research & Education
Crane Fund for Widows and Children
Canadian Public Health Association
Interlynx Relocation Management Ltd.
Toyota Canada Inc.
Vascular Surgery Associate Practice

Donations \$500 to \$999

GC Stage Equipment Ltd
Imaginus Canada
London and Midland

In Kind

CANPAR Transport
Delta Hotels
Mayer Laboratories
Minolta Konica
Oulton Technology Management

Individuals

Thank you to the many thoughtful and generous individuals who donated throughout the year.

A special word of thanks to the many volunteers who donated their time and skills to help us in the fight against HIV/AIDS.

Walk for Life

National Lead Sponsor:
Molson

National Platinum Sponsor:
Allard Johnson

National Gold Sponsors:
Canpar
Gilead
GlaxSmithKline in partnership with Shire Biochem
Pfizer

National Silver Sponsors:
Abbott
BMS Virology
OUT TV

Financial Summary

Statement of Financial Position

March 31, 2006, with comparative figures for 2005

Assets	2005 - 2006	2004 - 2005
CURRENT ASSETS		
Cash	347,019	498,333
Accounts receivable	231,112	111,256
Prepaid expenses	--	9,027
CAPITAL ASSETS	42,955	33,295
TOTAL	\$667,552	651,911

Liabilities and Net Assets	2005 - 2006	2004 - 2005
CURRENT LIABILITIES		
Accounts payable and accrued liabilities	274,957	228,411
Deferred contributions	176,110	121,546
	451,067	349,957
NET ASSETS		
Investments in capital assets	42,955	33,295
Unappropriated	173,530	268,659
TOTAL	\$667,552	651,911

Statement of Operations

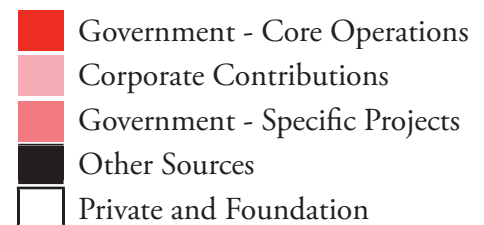
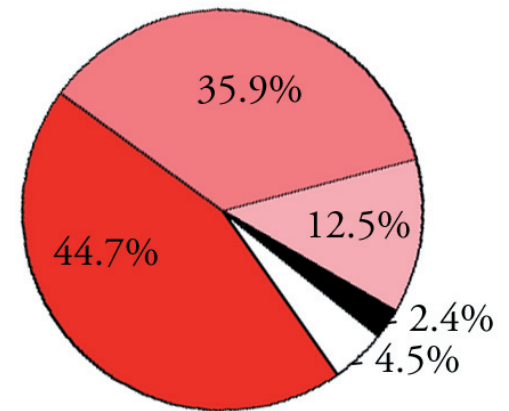
Year ended March 31, 2006, with comparative figures for 2005

Revenue	2005 - 2006	2004 - 2005
Grants & contributions	1,595,367	1,447,296
Donations	1,001,138	527,130
Conference registration fees	--	5,217
Membership fees	58,100	48,520
Other contributions	124,337	5,454
Interest	7,967	6,895
TOTAL	2,786,909	2,040,512

Expenses	2005 - 2006	2004 - 2005
Personnel & administrative	1,421,777	1,180,855
Travel	505,899	337,201
Materials & supplies	307,129	125,281
Amortization of capital assets	16,807	13,943
Equipment purchase & rental	--	40,224
Rent & utilities	136,387	123,067
Payments to other groups	485,172	194,500
Other	14,853	49,148
TOTAL	2,888,024	2,064,219

Excess of revenue over expenses (101,115) (23,707)

Revenues



Expenses

